

TRANSCRIPT ORDER FORM - DIRECTIONS ON THE REVERSE SIDE

PART I - To be completed by appellant within ten days of filing the notice of appeal

Short Title: _____ District: _____
District Court Number: _____ Circuit Court Number: _____
Name of Attorney: _____
Name of Law Firm: _____
Address of Firm: _____
Telephone of Firm: _____ Attorneys for: _____
Name of Court Reporter: _____ Telephone of Reporter: _____

PART II - COMPLETE SECTION A OR SECTION B

SECTION A - I HAVE NOT ORDERED A TRANSCRIPT BECAUSE

- ☐ A transcript is not necessary for this appeal, or
☐ The necessary transcript is already on file in District Court
☐ The necessary transcript was ordered previously in appeal
number _____

SECTION B - I HEREBY ORDER THE FOLLOWING TRANSCRIPT:

(Specify the date and proceeding in the space below)

Voir dire: _____; Opening Statements: _____;
Trial proceedings: _____; Instruction Cnf: _____;
Jury Instructions: _____; Closing Arguments: _____;
Post Trial Motions: _____; Other Proceedings: _____.

(Attach additional pages if necessary)

☐ Appellant will pay the cost of the transcript.

My signature on this form is my agreement to pay for the transcript ordered on this form.

☐ This case is proceeding under the Criminal Justice Act.

NOTE: Leave to proceed *in forma pauperis* does not entitle appellant to a free transcript. An order of the district court allowing payment for the transcript at government expense must be obtained. See 28 U.S.C. §753(f).

CERTIFICATE OF COMPLIANCE

I certify that I have read the instructions on the reverse of this form and that copies of this transcript order form have been served on the court reporter (if transcript ordered), the Clerk of U.S. District Court, all counsel of record or pro se parties, and the Clerk of the U.S. Court of Appeals for the Tenth Circuit. I further certify that satisfactory arrangements for payment for any transcript ordered have been made with the court reporter(s).

Signature of Attorney/Pro Se: _____ Date: _____

PART III - TO BE COMPLETED BY THE COURT REPORTER

Upon completion, please file one copy with the Clerk of the U.S. Court of Appeals and one copy with the Clerk of the U.S. District Court.

Date arrangements for payment completed: _____

Estimated completion date: _____

Estimated number of pages: _____

I certify that I have read the instructions on the reverse side and that adequate arrangements for payment have been made.

Signature of Court Reporter: _____ Date: _____